

04/28/99



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PTO/SB/05 (12/97)

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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	14090/40006	Total Pages	31
	First Named Inventor or Application Identifier			
	Cook, et al.			
Express Mail Label No.		EL246311605US		

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
<div>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)</div> <div>2. <input checked="" type="checkbox"/> Specification [Total Pages 15] (preferred arrangement set forth below)<ul style="list-style-type: none">- Descriptive title of the invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure</div> <div>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 5]</div> <div>4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 3]<ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</div> <div>5. <input type="checkbox"/> Incorporation by Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</div> <div>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</div> <div>7. Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary)<ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies</div>	
ACCOMPANYING APPLICATION PARTS	
<div>8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</div> <div>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</div> <div>10. <input type="checkbox"/> English Translation Document (if applicable)</div> <div>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</div> <div>12. <input type="checkbox"/> Preliminary Amendment</div> <div>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</div> <div>14. <input checked="" type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application. Status still proper and desired</div> <div>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</div> <div>16. <input type="checkbox"/> Other:</div>	
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No:	

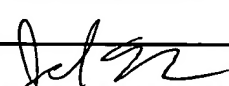
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NAME	Cumpston & Shaw			ATTN:	John E. Thomas
ADDRESS	Two State Street, Suite 850				
CITY	Rochester	STATE	New York	ZIP CODE	14614
COUNTRY	United States	TELEPHONE	(716) 325-5553	FAX	(716) 262-3906

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FEE TRANSMITTAL <i>Note: Effective October 1, 1997. Patent fees are subject to annual revision.</i>		Complete if Known	
		Application Number	
		Filing Date	
		First Named Inventor	Cook, et al.
		Group Art Unit	
		Examiner Name	
TOTAL AMOUNT OF PAYMENT	\$585	Attorney Docket Number	14090/40006

METHOD OF PAYMENT (check one)				3. ADDITIONAL FEES																																									
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number: 03-3875 Deposit Account Name: Cumpston & Shaw <input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance				Fee Description Fee Code Fee Paid <input type="checkbox"/> Surcharge - late filing fee or oath 205 \$0.00 <input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet 227 \$0.00 <input type="checkbox"/> Non-English specification 139 \$0.00 <input type="checkbox"/> For filing a request for reexamination 147 \$0.00 <input type="checkbox"/> Requesting publication of SIR prior to Examiner action * 112 \$0.00 <input type="checkbox"/> Requesting publication of SIR after Examiner action * 113 \$0.00 <input type="checkbox"/> Extension for reply within first month 215 \$0.00 <input type="checkbox"/> Extension for reply within second month 216 \$0.00 <input type="checkbox"/> Extension for reply within third month 217 \$0.00 <input type="checkbox"/> Extension for reply within fourth month 218 \$0.00 <input type="checkbox"/> Extension for reply within fifth month 228 \$0.00 <input type="checkbox"/> Notice of Appeal 219 \$0.00 <input type="checkbox"/> Filing a brief in support of an appeal 220 \$0.00 <input type="checkbox"/> Request for oral hearing 221 \$0.00 <input type="checkbox"/> Petition to institute a public use proceeding 138 \$0.00 <input type="checkbox"/> Petition to revive - unavoidable 240 \$0.00 <input type="checkbox"/> Petition to revive - unintentional 241 \$0.00 <input type="checkbox"/> Utility issue fee (or reissue) 242 \$0.00 <input type="checkbox"/> Design issue fee 243 \$0.00 <input type="checkbox"/> Plant issue fee 244 \$0.00 <input type="checkbox"/> Petitions to the Commissioner 122 \$0.00 <input type="checkbox"/> Petitions related to provisional applications 123 \$0.00 <input type="checkbox"/> Submission of Information Disclosure Stmt 126 \$0.00 <input checked="" type="checkbox"/> Recording each patent assignment per property 581 \$40.00 Number of properties 1 <input type="checkbox"/> Filing a submission after final rejection (37 CFR 1.129(a)) 246 \$0.00 <input type="checkbox"/> For each additional invention to be examined (37 CFR 1.129(b)) 249 \$0.00 Other Fee (specify): Other Fee (specify):																																									
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other																																													
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1. FILING FEE <table style="width: 100%;"> <thead> <tr> <th>Fee Description</th> <th>Fee Code</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> Utility filing fee</td> <td>201</td> <td>\$380.00</td> </tr> <tr> <td><input type="checkbox"/> Design filing fee</td> <td>206</td> <td>\$0.00</td> </tr> <tr> <td><input type="checkbox"/> Plant filing fee</td> <td>207</td> <td>\$0.00</td> </tr> <tr> <td><input type="checkbox"/> Reissue filing fee</td> <td>208</td> <td>\$0.00</td> </tr> <tr> <td><input type="checkbox"/> Provisional filing fee</td> <td>214</td> <td>\$0.00</td> </tr> </tbody> </table> <div style="text-align: right;"> SUBTOTAL (1) \$380.00 </div>				Fee Description	Fee Code	Fee Paid	<input checked="" type="checkbox"/> Utility filing fee	201	\$380.00	<input type="checkbox"/> Design filing fee	206	\$0.00	<input type="checkbox"/> Plant filing fee	207	\$0.00	<input type="checkbox"/> Reissue filing fee	208	\$0.00	<input type="checkbox"/> Provisional filing fee	214	\$0.00																								
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2. CLAIMS <table style="width: 100%;"> <thead> <tr> <th></th> <th>Number Filed</th> <th>Number Extra</th> <th>Fee</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>34</td> <td>14</td> <td>\$9</td> <td>\$126</td> </tr> <tr> <td>Independent Claims</td> <td>4</td> <td>1</td> <td>\$39</td> <td>\$39</td> </tr> <tr> <td>Multiple Dependent Claims</td> <td></td> <td>0</td> <td>\$41</td> <td>\$0</td> </tr> </tbody> </table> <table style="width: 100%;"> <thead> <tr> <th>Fee Description</th> <th>Fee Code</th> <th>Fee</th> </tr> </thead> <tbody> <tr> <td>Claims in excess of 20</td> <td>203</td> <td>\$11.00</td> </tr> <tr> <td>Independent claims in excess of 3</td> <td>202</td> <td>\$41.00</td> </tr> <tr> <td>Multiple dependent claims</td> <td>204</td> <td>\$135.00</td> </tr> <tr> <td>Reissue independent claims over original patent</td> <td>209</td> <td>\$41.00</td> </tr> <tr> <td>Reissue claims in excess of 20 and over original patent</td> <td>210</td> <td>\$11.00</td> </tr> </tbody> </table> <div style="text-align: right;"> SUBTOTAL (2) \$165.00 </div>					Number Filed	Number Extra	Fee	Fee Paid	Total Claims	34	14	\$9	\$126	Independent Claims	4	1	\$39	\$39	Multiple Dependent Claims		0	\$41	\$0	Fee Description	Fee Code	Fee	Claims in excess of 20	203	\$11.00	Independent claims in excess of 3	202	\$41.00	Multiple dependent claims	204	\$135.00	Reissue independent claims over original patent	209	\$41.00	Reissue claims in excess of 20 and over original patent	210	\$11.00	* Reduced by Basic Filing Fee Paid <div style="text-align: right;"> SUBTOTAL (3) \$40.00 </div>			
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SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name	John E. Thomas			Reg. Number	34,070
Signature		Date	4/28/99	Deposit Account User ID	03-3875

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Deborah S. Wasserman

